

**Work Order ID 122260**

Monday, July 14, 2014 1:54:18 PM

**\*122260\***

Page 1

Item ID: D4634-041      Accept      **\*N900040100\***      Setup Start **\*NS1\***  
Revision ID:      Stop **\*NS2\***  
Item Name: Fwd, Center Ceiling Panel Assembly  
Start Date: 8/08/14      Start Qty: 1.00      **\*1\***      Cust Item ID:  
Required Date: 8/08/14      Req'd Qty: 1.00      **\*1\***      Customer:  
Reference:

Approvals:      Process Plan: MLJ      Date: 1407-15      Tooling:      Date:      Run Start **\*NR1\***  
QC:      Date:      SPC (Y/N):      Date:      Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D4634	F								

100

0.00

**\*100\***

HandThermo

Hand Finishing Thermoforming

Memo

Pick Kit

0.00

568  
14/8/19

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<table style="width: 100%;"> <tr> <td style="width: 33%;">           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </td> <td style="width: 33%;">           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </td> <td style="width: 33%;">           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </td> <td style="width: 33%;">           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </td> </tr> </table>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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Page 2

**\*NS1\***

Stop \*NS2\*

**Customer:**

**\*NR1\***

**\*NR2\***

**Insp.  
Stamp**

0.00

0.00

## Memo

\*\*\*BEFORE INTALLING D4728-051, APPLY A 3/16" SEEM OF PLASTIC-  
WELD 2 ON TOTAL LENGHT OF PART ON EANCH SIDE OF LIGHT, LET  
DRY FOR ONE HOUR\*\*\*  
PLASTIC-WELD 2 BATCH: m129001 1-1-

1- Assemble as per Dwg D4634-041

2- install No Smoking & seat belt symbols

### 3- Install led lights

#### 4- Install Air valves

## 5-Install Wiring Harness

### 5-Install wiring harness

QC5- Inspect part completeness to step on W/O

0.00

0.00

## Memo

## Quality Control

DAS  
9  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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Equip/Tooling									
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**\*122260\***

Page 3

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Revision ID: Stop **\*NS2\***  
Item Name: Fwd, Center Ceiling Panel Assembly  
Start Date: 8/08/14 Start Qty: 1.00 **\*1\*** Cust Item ID:  
Required Date: 8/08/14 Req'd Qty: 1.00 **\*1\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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130

Identify as per dwg &amp; Stock Location: \_\_\_\_\_

0.00

**\*130\***

Packaging

Memo

AUG 20 2014

DAS  
06  
9-89

Packaging

140

QC21 - Final Inspection - Work Order Release

0.00

**\*140\***

QC

Memo

0.00

Quality Control

MLJ 14-08-21

① 4-8-20

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

Monday, July 14, 2014 1:54:17 PM

Page 1

Work Order ID: 122260

\*122260\*

Parent Item: D4634-041

\*D4634-041\*

Parent Item Name: Fwd, Center Ceiling Panel Assembly

Start Date: 8/08/14

Required Date: 8/08/14

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev. A 12/08/09 New Issue DL  
12/11/08 Document release DL VERIFIED BY:JLM IPP Rev C 13/07/09  
Dwg Update DL verf: DD IPP Rev D Dwg Update 13/12/23  
DL IPP REV E Dwg update 14/01/20

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
---------------------------------	------------------------	---------------	-------------	---------------------	------------------	-----------------	--------------------	----------------	-------------	--------------	---------------	----------------	--------

D4743-1

Manufactured No

100

Each

68.0000

2

2

\*D4743-1\*

Speaker Grill

\*\*

Location

Loc Qty

Loc Code

MF

68

120098

31

120948

37

MS21044-N08

Purchased

No

100

Each

421.0000

8

8

\*MS21044-N08\*

Nut

\*\*

Location

Loc Qty

Loc Code

ST306

421

123741

7

m127813

22

m128300

1

m128429

13

m128578

14

m128650

14

m129499

100

m129630

250

MS24693-BB50

Purchased

No

100

Each

124.0000

8

8

\*MS24693-BB50\*

SCREW

\*\*

Location

Loc Qty

Loc Code

ST296

124

m127924

52

m128062

72

SMP  
14/8/19

SMP  
14/8/19

SMP

14/8/19

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Picklist Print

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Page 2

Work Order ID: 122260

\*122260\*

Parent Item: D4634-041

\*D4634-041\*

Parent Item Name: Fwd, Center Ceiling Panel Assembly

Start Date: 8/08/14

Required Date: 8/08/14

Start Qty: 1.00

Required Qty: 1.00

NAS1149DN832J

Purchased

No

100

Each

3,111.000

8

8

**\*NAS1149DN832.J\***

\*\*

Washer

Location

Loc Qty

Loc Code

ST277

3111

M128948

219

124555

145

M126319

11

M127255

484

M128429

952

M129499

1000

M129541

300

D4634-141

Manufactured

No

100

Each

0.0000

1

1

**\*D4634-141\***

\*\*

Fwd, Center Ceiling Replacement Panel Assembly

B121121

D4646-1

Manufactured

No

100

Each

61.0000

2

2

**\*D4646-1\***

\*\*

Plenum Cap Assembly

Location

Loc Qty

Loc Code

MF3

61

114006

46

114625

15

D4652-1

Manufactured

No

100

Each

26.0000

2

2

**\*D4652-1\***

\*\*

Air Valve, 1.16 Id Disk Type

Location

Loc Qty

Loc Code

MF

23

116424

23

MF3

3

111777

3

B116425

2

Monday, July 14, 2014 1:54:18 PM

Shop Packet Print

Page 2

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
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Page 3

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Parent Item: D4634-041

**\*D4634-041\***

Parent Item Name: Fwd, Center Ceiling Panel Assembly

Start Date: 8/08/14

Required Date: 8/08/14

Start Qty: 1.00

Required Qty: 1.00

D4728-047

Manufactured No

100

Each

13.0000

1

1

**\*D4728-047\***

Advisory Light, Fwd

**\*\***

Location

Loc Qty

Loc Code

MF5

13

116292

3

116293

5

116294

4

117912

1

DAS  
27  
9-89

14/8/19

D4728-051

Manufactured No

100

Each

7.0000

1

1

**\*D4728-051\***

Cabin Lights #1

**\*\***

Location

Loc Qty

Loc Code

MF

6

115159

2

116270

4

MF5

1

117914

1

DAS  
27  
9-89

14/8/19

PLT1.5M-M

Purchased No

100

Each

1,392.000

8

8

**\*PI T1 5M-M\***

Tie Wrap

**\*\***

Location

Loc Qty

Loc Code

ST389

1392

124363

2

m126551

390

m129712

1000

DAS  
27  
9-89

14/8/19

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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# Picklist Print

Monday, July 14, 2014 1:54:18 PM

Page 4

Work Order ID: 122260

**\*122260\***

Parent Item: D4634-041

**\*D4634-041\***

Parent Item Name: Fwd, Center Ceiling Panel Assembly

Start Date: 8/08/14

Required Date: 8/08/14

Start Qty: 1.00

Required Qty: 1.00

50-009-2

Purchased

No

100

Each

434.0000

1

1

**\*50-009-2\***

Grommet

**\*\***

Location

Loc Qty

Loc Code

MF5

8

m128022

8

ST378

426

122594

1

m128022

9

m128047

416

2351-20-27-C3C

2351-20-27-  
Z3CT

Purchased

No

100

Each

57.0000

1

1

**\*2351-20-27-C3C\***

STUD

**\*\***

Location

Loc Qty

Loc Code

MF5

29

m126740

2

m128068

27

ST396

28

m127922

28

5hp  
14/8/19

5hp  
14/8/19

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

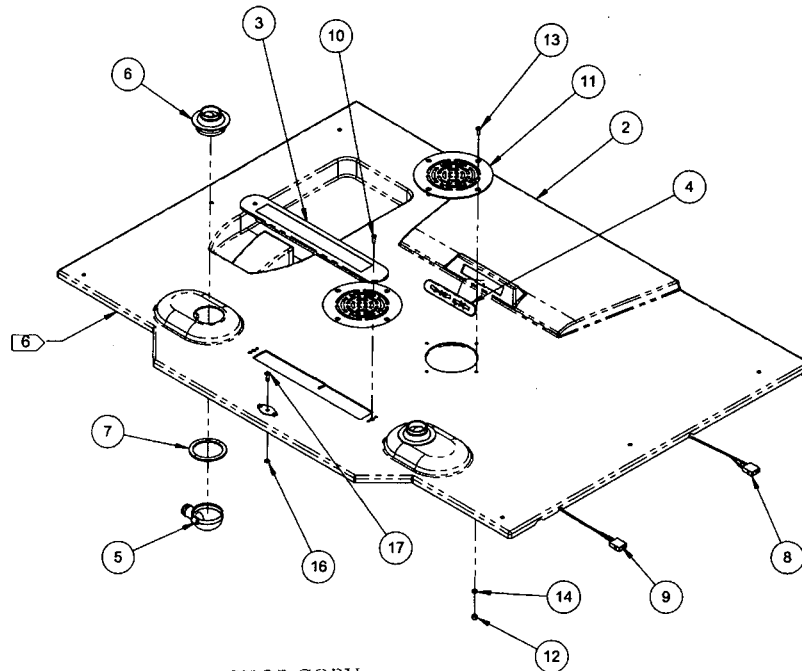
**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Design											
Doc/Data											
Equip/Tooling											
Handling/Pre											
Material											
Operator											
Offset/Setup											
Process											
Supplier											
Training											
Transport											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	



SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER  
NO. 122260 ML5  
14-07-15

# **D4634-041 FWD, CENTER CEILING PANEL ASSY**

## **NOTES:**

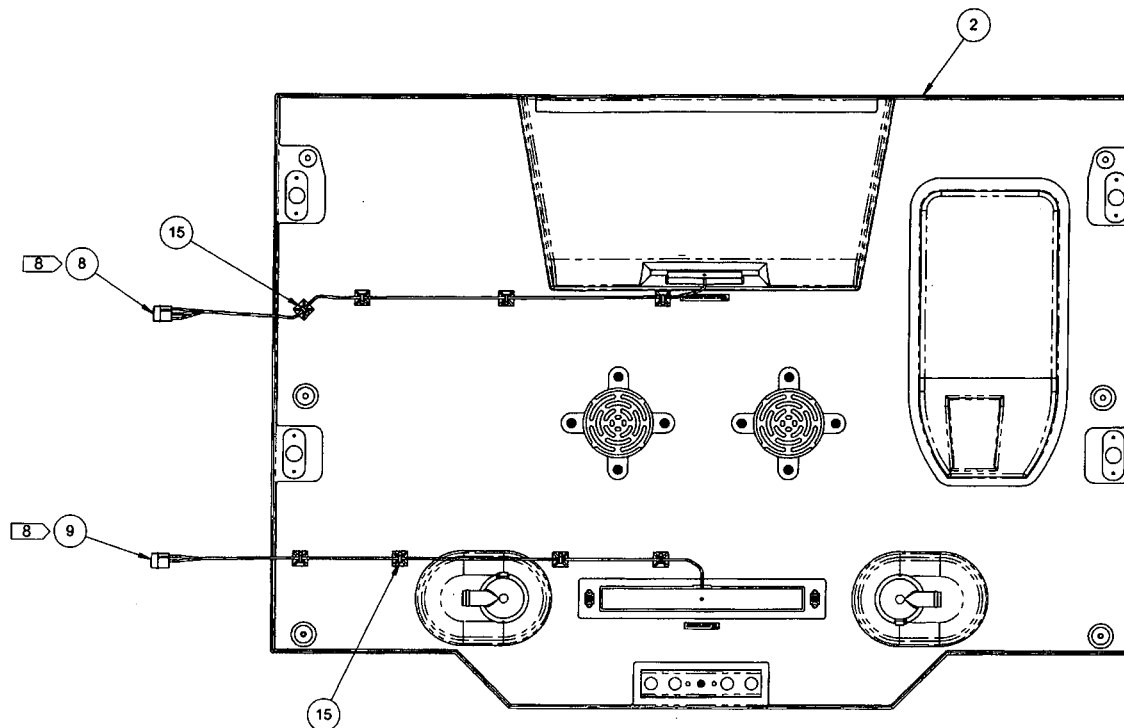
- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY PER QSI 044 6.4, ON SMOOTH SIDE
- 7) WEIGHT: 7.0 lbs
- 8) INSTALL D4728-047/051 WIRE HARNESS PER QSI 048

ITEM NO.	QTY. -041	PART NUMBER	DESCRIPTION
1	X	D4634-041	FWD, CENTER CEILING PANEL ASSY
2	1	D4634-141	FWD, CENTER CEILING REPLACEMENT PANEL ASSY
3	1	D4638-1 (REF)	LED LIGHT (REF PART OF D4728-051)
4	1	D4645-1 (REF)	NO SMOKING & FASTEN BELT LIGHT (PART OF D4728-047)
5	2	D4646-1	PLENUM CAP ASSEMBLY
6	2	D4652-1	AIR VALVE
7	2	D4652-3 (REF)	MOUNTING NUT (PART OF D4652-1)
8	1	D4728-047	ADVISORY LIGHT (FWD) HARNESS ASSEMBLY
9	1	D4728-051	CABIN LIGHT #1 HARNESS ASSEMBLY
10	2	N/A (REF)	SCREW (PART OF D4728-051)
11	2	D4743-1	SPEAKER GRILL
12	8	MS21044-N08	NUT
13	8	MS24693-BB50	SCREW
14	8	NAS1149DN832J	WASHER
15	8	PLT1.5M-M	TIE-WRAP (OR PLT1.5M-C)
16	1	50-009-2	GROMMET
17	1	2351-20-27-C3C	STUD

**RELEASED**

2014 FEB 25  
ECN 14-519

F	REVISE BOM (ZN D4-7); ADD DIM (ZN B8-9); 10.20 WAS 10.05 (ZN B6-10, B5-12, B5-14); ADD DETAIL V (ZN C4-10, B4-12, C4-14, A4-16); CHANGE PROTRUDE SECTION DIMS TO REF (ZN C7-10, C7-12, C7-14)	RF	14.02.03
E	REVISED BOM (ZN C4-1, C4-3, D4-5, C4-7, C4-8, C4-9); ADDED NOTE 11) (ZN D5-7, A8-7, D5-8, A8-8, D7-9, A8-9); 3.70 WAS 3.83 (ZN C6-11); 1.88 WAS 2.00 (ZN D7-13); 6.13 WAS 6.26 (ZN B6-16); REVISE DETAIL B (ZN A8-16)	RF	14.01.09
D	ADDED PLT1.5M-M (ZN C4-5, C6-6); D5021-1 (ZN D4-7, D5-7); D5021-3 (ZN D4-8, D5-8); D5021-5 (ZN D4-9, B7-9); MPNY-7505-B-C (ZN D4-9, B7-9); Ø0.122 (ZN B4-11, B4-13); DETAIL "U" (ZN C2-17); 3.83 WAS 3.87 (ZN C6-11); 2.00 WAS 2.02 (ZN D6-13); REVISE NOTE 8) & 10) (ZN A8-7, A8-8, A8-9); & NOTE 1) (ZN A8-10, A8-12, A8-14); 3.80 WAS 3.84 (ZN D4-17, B8-17); REMOVED D4694-71-041-043/045/047, D4647-3/7/8; DIMENSION SHIFTED DUE ADDING D5021-1/-3/-5; Ø0.250 WAS Ø0.206 (ZN D6-11, C3-13 & D6-15)	RF	13.12.09
C	REVISE GENERAL NOTES (ZN A8-7, A8-8, A8-9) & BOM (ZN D4-1, D4-3, D4-5, D4-7, D4-8); Ø0.206 WAS Ø0.207 (ZN D6-11, C3-13, C6-15) ADD DIM. (ZN B6-7, B7-7, D7-8, & D6-8)	RF	13.06.18
B	ADDED D4634-141/-143/-145 (ZN B4-7, B4-8, B4-9); REVISE D4634-041/-042/-043/-044 PART LIST & GENERAL NOTES: ADD DETAILS R,S,T SHT 10, 12, 14, 18, 17	RF	12.11.30
A	NEW ISSUE	RF	12.07.25
REV.	DESCRIPTION	BY	DATE
DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	JC	DRAWING NO.	REV. F
MFG. APPR.	JC	D4634	SHEET 1 OF 17
APPROVED	JC	TITLE	SCALE
DE APPR.	JC	CENTER CEILING PANELS	NTS
DATE	14.02.03	COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE, OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	



**D4634-041 FWD. CENTER CEILING PANEL ASSY**  
AUXILIARY VIEW

**RELEASED**

2014 FEB 25 *q*

DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	<i>PC</i>	DRAWING NO.	REV. F
MFG. APPR.	<i>AL</i>	<b>D4634</b>	SHEET 2 OF 17
APPROVED	<i>SH</i>	TITLE	SCALE
DE APPR.	<i>SH</i>	<b>CENTER CEILING PANELS</b>	NTS
DATE	14.02.03	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DISSEMINATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	